



# COUNTY OF LOS ANGELES DEPARTMENT OF HUMAN RESOURCES

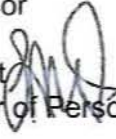
HEADQUARTERS  
579 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012  
(213) 974-2406 FAX (213) 621-0387

BRANCH OFFICE  
3333 WILSHIRE BOULEVARD • LOS ANGELES, CALIFORNIA 90010  
(213) 738-2222 FAX (213) 637-0820

**LISA M. GARRETT**  
ACTING DIRECTOR OF PERSONNEL

December 8, 2009

To: Each Supervisor

From: Lisa M. Garrett   
Acting Director of Personnel

Subject: **LA COUNTY STARS! – FEBRUARY 2010**  
**(SPECIAL TALENTS FOR ACHIEVING REMARKABLE SERVICE)**

**LA COUNTY STARS!** serves to recognize employee performance reflective of the County's mission statement and values. Under **LA COUNTY STARS!**, Board staff, management and non-management employees, individuals and teams may be recognized. Board Chiefs of Staff, Deputy Chief Executive Officers, Department Heads, and Chief Deputies are not eligible to be nominated.

Consistent with the County mission statement and values, your office may submit only one nomination (individual or team) per month. These nominations should reflect the positive image of County employees and provide an excellent opportunity for enhancing staff morale. Please note that the number of awards given each month will depend upon the number of nominees who meet the threshold criteria based upon the points awarded for each entry (18 out of 20 points required for consideration).

Your office's nomination is requested by January 5, 2010. Please submit the appropriate three-page nomination form for your nominee/team from one of the following three strategies from Goal 1: Operational Effectiveness:

- Fiscal Sustainability
- Service Excellence and Organizational Effectiveness
- Workforce Excellence

For the month of February 2010, the **LA COUNTY STARS!** strategic category award ceremonies will take place as follows:

February 2	Service Excellence and Organizational Effectiveness
February 2	Workforce Excellence
February 16	Fiscal Sustainability

Each Supervisor  
December 8, 2009  
Page 2

Your nomination for **only one** of the above categories should be sent to Ann Gomez, Program Coordinator, at 3333 Wilshire Boulevard, Suite 1000, Los Angeles, CA 90010. These forms are available via an e-mail request to [lacountystars@hr.lacounty.gov](mailto:lacountystars@hr.lacounty.gov). **The Department of Human Resources (DHR) will become the sole proprietor of all nominations; consequently, we are unable to provide or produce copies for departmental use.** The nomination forms are attached for your use.

Please note that the total score for your office's entry will be based upon the points assigned to the required nomination form criteria and the shared values checklist. Following the selection and notification of **LA COUNTY STARS!**, the Board of Supervisors will recognize the individual(s)/team(s) on the Board meeting dates as noted above. If you have any questions, please contact me at (213) 974-2406 or contact Sandra Wallace Blaydow of my staff at (213) 351-8945.

Thank you.

LMG:SKT  
SWB:lh

Attachments



**Employee/Team Nomination (Monthly)**  
**LA COUNTY STARS! (Special Talents for Achieving Remarkable Service)**  
**Fiscal Sustainability**

**Employee/Team Name (use space provided below to enter Team Members' information):**

**Payroll Title**

**Years in County Service:**

**Department Name**

**Division of Department**

**Work Address (for teams, please attach a separate sheet):**

**Work Telephone Number:**

**Work E-mail Address:**

**Please provide the name of a staff person who may be contacted if DHR staff have questions about the details of this nomination:**

**Name:**

**Phone Number:**

**This nomination is submitted by the following departmental administrators:**

**Signature of Nominator:**

**Date:**

**Name, Title, Mailing Address of Nominator:**

**Phone Number:**

**Fax Number:**

**Department Head's Signature:**

**Date:**

**Team Member(s) Information**

<b>Name</b>	<b>Title</b>	<b>Department /Division</b>	<b>Years of Service</b>	<b>Telephone</b>	<b>E-mail</b>
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**Please use Arial font; no less than 11 pitch for all entries**

Employee /Team Name(s):\_\_\_\_\_

Fiscal Sustainability: Strengthening the County fiscal capacity.

1. Describe how the nominee promoted sound, prudent, and transparent short-and long-range fiscal policies and practices.
- Internal Use Only

\_\_\_\_\_

2. Describe how the nominee helped ensure maintenance of critical, high priority County public services despite cyclical economic conditions.
- \_\_\_\_\_

3. Describe how the nominee implemented performance-based management and decision-making skills based on *Performance Counts!* data.
- \_\_\_\_\_

Initial

Dept No.



## **SHARED VALUES CHECKLIST**

How well did the nominee reflect the County of Los Angeles' Shared Values in accomplishing their results? **Please note:** It is important to provide specific examples of shared values as they are a critical component of the rating. A numerical score will be assigned to each shared value and will be carefully considered in compiling the candidate's overall score.

*Internal Use Only*

**Accountability** – accepts responsibility for the decisions made and the actions taken.

\_\_\_\_\_

**A Can-Do Attitude** – approaches each challenge believing that, together, a solution can be achieved.

\_\_\_\_\_

**Compassion** – treats those we serve and each other in a kind and caring manner.

\_\_\_\_\_

**Customer Orientation** – places the highest priority on meeting our customers' needs with accessible, responsive quality services, and treating them with respect and dignity.

\_\_\_\_\_

**Integrity** – acts consistent with our values and the highest ethical standards.

\_\_\_\_\_

**Leadership** – engages, motivates and inspires others to collaboratively achieve common goals through example, vision and commitment.

\_\_\_\_\_

**Professionalism** – performs to a high standard of excellence, and takes pride in our employees and invests in their job satisfaction and development.

\_\_\_\_\_

**Respect for Diversity** – values the uniqueness of every individual and their perspective.

\_\_\_\_\_

**Responsiveness** – takes the action needed in a timely manner.

\_\_\_\_\_

**BONUS:** Describe how the nominee employed **collaboration** in their achieving results.

\_\_\_\_\_

*Initial*

*Dept No.*



**Employee/Team Nomination (Monthly)**  
**LA COUNTY STARS! (Special Talents for Achieving Remarkable Service)**  
*Service Excellence and Organizational Effectiveness*

**Employee/Team Name (use space provided below to enter Team Members' information):**

<b>Payroll Title</b>	<b>Years in County Service:</b>
<b>Department Name</b>	<b>Division of Department</b>
<b>Work Address (for teams, please attach a separate sheet):</b>	
<b>Work Telephone Number:</b>	<b>Work E-mail Address</b>
<b>Please provide the name of a staff person who may be contacted if DHR staff have questions about the details of this nomination:</b>	<b>Name:</b>
	<b>Phone Number:</b>

***This nomination is submitted by the following departmental administrators:***

<b>Signature of Nominator:</b>	<b>Date:</b>
<b>Name, Title, Mailing Address of Nominator:</b>	<b>Phone Number:</b>
	<b>Fax Number:</b>
<b>Department Head's Signature:</b>	<b>Date:</b>

**Team Member(s) Information**

<b>Name</b>	<b>Title</b>	<b>Department /Division</b>	<b>Years of Service</b>	<b>Telephone</b>	<b>E-mail</b>
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Employee /Team Name(s): \_\_\_\_\_

**Service Excellence and Organizational Effectiveness:** Providing the public with easy access to quality information and services that are both beneficial and responsive.

1. Describe how the nominee improved the quality or delivery of a service product and demonstrated the ability to analyze, assess and improve the effectiveness of the organization. *Internal Use Only*

2. Describe how the nominee responded to customer requirements in an exemplary, timely, and courteous manner to streamline and improve administrative operations and processes to make the organization more efficient.

3. Describe how the nominee streamlined and improved administrative operations and processes to increase effectiveness, enhance customer service, and support responsiveness to County operations. Describe how the nominee evaluated the organizational structure to achieve operational efficiencies and improve County service delivery, including restructuring or consolidating existing County departments, functions, or commissions, and partnerships with external agencies.

Initial

Dept No.

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*Internal Use Only*

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**Compassion** – treats those we serve and each other in a kind and caring manner.

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**Customer Orientation** – places the highest priority on meeting our customers' needs with accessible, responsive quality services, and treating them with respect and dignity.

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\_\_\_\_\_

*Initial*

*Dept No.*





**Employee/Team Nomination (Monthly)**  
**LA COUNTY STARS! (Special Talents for Achieving Remarkable Service)**  
*Workforce Excellence*

**Employee/Team Name (use space provided below to enter Team Members' information):**

**Payroll Title**

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**Please use Arial font; no less than 11 pitch for all entries**

Employee /Team Name(s): \_\_\_\_\_

**Workforce Excellence:** Enhancing the quality and productivity of the County workforce.

*Internal Use Only*

1. Describe how the nominee implemented human capital management best practices (e.g., succession planning, professional development, employee surveys). \_\_\_\_\_

2. Describe how the nominee enhanced the recruitment, development, and retention and well-being of qualified County employees. \_\_\_\_\_

3. Describe or list any training or skill development used by the nominee in creating program(s) to enhance the quality and productivity of the County workforce. \_\_\_\_\_

\_\_\_\_\_  
*Initial*

\_\_\_\_\_  
*Dept No.*

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***BONUS:*** Describe how the nominee employed **collaboration** in their achieving results.

\_\_\_\_\_

*Initial*

*Dept No.*